FORM D

1373499

(ANUALLY EXELLED COP)

U.S. SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

FUKI

OMB APPROVAL
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SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering (check if this is an amendment and name has changed, and indicate change.) **EMPEROR GREATER CHINA SERIES – SERIES A INTERESTS** ULOE Filing Under (Check box(es) that apply): Rule 504 Rule 505 **Rule** 506 Section 4(6) Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) EMPEROR FUND, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) +86.21.6335.0918 c/o Emperor Management, LLC, The Bund Center, 222 Yan An Road East, Suite 3705, Shanghai 200002, China (Number and Street, City, State, Zip Code) Address of Principal Business Operations Telephone Number (if different from Executive Offices) (Including Area Code) Brief Description of Business THOMSUN securities investment EIMANCIA Type of Business Organization corporation Imited partnership, already formed __ other (please specify):] business trust limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: Estimated [0|6][0|6]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

[D][E]

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

M

A. BASIC IDENTIFICATION DATA												
2. Enter the information requested for the following:												
• Each promoter of the issuer, if the issuer has been organized within the past five years;												
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;												
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 												
Each general and managing partner of partnership issuers.												
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General Partner							
			Executive Officer		Ocherai Fattiei							
Full Name (Last name first, if ind	lividual)											
Emperor Management, LL												
Business or Residence Address	(Number and Street,	City, State, Zip Code)										
c/o Emperor Management,	LLC, The Bund	Center, 222 Yan An Roa	d East, Suite 3705, Shangh	ai 200002, China								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Member							
Full Name (Last name first, if ind	lividual)											
Mullen, Edward												
Business or Residence Address	(Number and Street,	City, State, Zip Code)										
c/o Emperor Management,	LLC, The Bund	Center, 222 Yan An Roa	d East, Suite 3705, Shangh	ai 200002, China								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if ind	dividual)											
Mullen, Geoffrey												
Business or Residence Address	(Number and Street,	City, State, Zip Code)										
. / . T	II C The Date	C 200 W A D	1 Fact C 24 2705 Clarely	-1200000 011								
c/o Emperor Management, Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or							
Check Box(es) that Apply.	Promoter	Beneficial Owner	Executive Officer	Director	Managing Partner							
Full Name (Last name first, if ind	dividual)											
Business or Residence Address	(Number and Street,	City, State, Zip Code)										
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)												
Business or Residence Address	(Number and Street.	City, State, Zip Code)										
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)												
Business or Residence Address	(Number and Street,	City, State, Zip Code)										
	(Use bl	ank sheet, or copy and use addi	tional copies of this sheet, as nece	essary.)	(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)							

		_			B. IN	VFORM.	ATION	ABOUT	OFFER	ING				
1.	Has the i	ssuer sold,	or does the	issuer inte	nd to sell, t	o non-accre	dited inves	tors in this	offering?	•••••			•••••	Yes No
					Answei	also in Ap	pendix, Col	lumn 2, if f	iling under	ULOE.				
2.			ım investme estment ma								••••••		••••••	*\$ <u>1,000,000</u>
3.	Does the	offering p	ermit joint	ownership (of a single (ınit?		•••••	******	•••••	************	•••••	•••••	Yes №
4.	Does the offering permit joint ownership of a single unit?													
	solicitati dealer re	on of purcl gistered wi	hasers in co ith the SEC roker or dea	nnection w and/or with	ith sales of a state or:	securities ir states, list th	the offering the name of	ng. If a pers the broker	son to be list or dealer. I	sted is an as f more than	sociated pe	rson or age	nt of a brok	er or
Full Nam			individual)	, , , , , , , , , , , , , , , , , ,	-y 040 101 111					•			· · ·	
Business	or Residen	ice Addres	s (Number a	and Street,	City, State,	Zip Code)								
Nome of	Associated	Broker or	Doolon		,			• • •				· · · · · · · · · · · · · · · · · · ·		
Name of	Associated	BIOKEI OI	Dealer								_			
States in	Which Per	son Listed	Has Solicit	ed or Intend	ds to Solicit	Purchasers								
(Check '			individual									ייייייייייייייייייייייייייייייייייייייי		All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam	e (Last nar	ne first, if	individual)					•		·				
			<u> </u>	10.	a: a:	<u> </u>								
Business	or Resider	ice Addres	s (Number a	and Street,	City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer											***
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers								
(Check	"All States	" or check	individual :	States)										All States
,	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT]	[NE] [SC]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR] [WY]	[PA]	
Full Nam	[RI] e (Last nai		[SD] individual)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]_	[WV]	[WI]	[WI]	[PR]	
Business	or Resider	ice Addres	s (Number	and Street,	City, State,	Zip Code)								
Name of	Associated	Broker or	Dealer											<u> </u>
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers	,				_			
					as to somer	i i urchascis	,							—
(Check	"All States [AL]	" or check [AK]	individual [AZ]	States) [AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	All States
	[IL] [MT]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [LIT]	[ME] [NY]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of		
	the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Series A Partnership Interests		\$ <u>15,000,000</u>
	Other (Specify)		\$
	Total	\$500,000,000*	\$ 15,000,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	12	\$ <u>15,000,000</u>
	Non-accredited Investors	NA NA	\$ NA
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs.	<u> </u>	\$
	Legal Fees		\$ <u>25,000</u>
	Accounting Fees.		\$ 2,000
	Engineering Fees		\$ <u>2,000</u> \$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) <u>Miscellaneous</u> (blue, sky fees, duplicating, courier, etc.)		·
	Total		\$ <u>3,000</u> \$ 30,000
	1 VW1	······	Φ >0.000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

This is a continuous offering. Therefore, the aggregate offering price could be greater than or less than this amount

		OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
	b. Enter the difference between the aggregate of Question 1 and total expenses furnished in responsis the "adjusted gross proceeds to the issuer."	nse to Part C - Question 4.a. This difference		\$499,970,000*
5.	Indicate below the amount of the adjusted gross per used for each of the purposes shown. If the an an estimate and check the box to the left of the estimate equal the adjusted gross proceeds to the issue.	nount for any purpose is not known, furnish stimate. The total of the payments listed		
			Payments to Officers,	
			Directors, & Affiliates	Payments To Others
	Salaries and fees		□ \$	□ \$
	Purchase of real estate		□ \$	□ \$
	Purchase, rental or leasing and installation of ma	□ \$	\$	
	Construction or leasing of plant buildings and fac-	□\$	□\$	
	Acquisition of other businesses (including the va	lue of securities involved in this offering		
	that may be used in exchange for the assets or see	<u>=</u>	\$	□ \$
	merger) Repayment of indebtedness		□ \$	_
	Working capital			□ \$
			□ \$	⊠ \$
	Other (specify): to be used as described in Issue Memorandum	er's Comidential Private Placement	□\$	⋈ \$499,970,000
	Column Totals		□\$	 ■ \$499,970,000
	Total Payments Listed (column totals added)		⊠ \$4	99,970,000*
	D	. FEDERAL SIGNATURE		
follov	ssuer has duly caused this notice to be signed by the ving signature constitutes an undertaking by the issuestaff, the information furnished by the issuer to any	er to furnish to the U.S. Securities and Exchai	nge Commission	, upon written reques
EMP	Print or Type) EROR FUND FUND, L.P. Emperor Management, LLC, General Partner	Signature Mully Managing M	Date	8/10/06
	of Signer (Print or Type) rd Mullen	Title of Signer (Print or Type) Managing Member of General Partner	With Co. I	<i> ` </i>

ATTENTION
Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)